

APPEARANCE



Mashantucket Pequot
Tribal Nation
Tribal Court

TO: The Mashantucket Pequot Tribal Court

	Docket No.:
Name of Case (Plaintiff) v.	(Defendant)
Court Division:	MASHANTUCKET PEQUOT TRIBAL COURT P.O. BOX 3126 101 PEQUOT TRAIL MASHANTUCKET, CT 06338-3126

PLEASE ENTER THE APPEARANCE OF

Name of Individual Attorney, Lay Advocate or Pro Se Party			Telephone No.
Mailing Address (No., Street, P.O. Box)			Fax No.
City/Town	State	Zip Code	Email Address

Court Appointed Attorney
 Attorney
 Lay Advocate
 Pro Se Party

In the above-entitled case for: ("X" appropriate box)

The Plaintiff(s)

The following Plaintiff only: _____.

The Defendant(s)

The following Defendant only: _____.

Other: _____.

Note: If other counsel have already appeared for the party or parties indicated above, state whether the appearance is:

In lieu of appearance of _____ already on file.

In addition to appearance already on file.

X _____ *Signed: individual attorney or pro se party* _____ *Print or type name* _____ *Date Signed*

CERTIFICATION	
<p>I hereby certify that a copy of the above was mail/delivered to:</p> <p style="padding-left: 40px;">All counsel and pro se parties of record.</p> <p style="padding-left: 40px;">Counsel or the party whose appearance is to be replaced.</p> <p>X _____ <i>Signed: individual attorney or pro se party</i> _____ <i>Date mailed/delivered</i></p>	<p><i>For Court Use:</i></p>